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APPLICANTS

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** CONTINUING DATA *****
 This application is a CIP of 10/055,137 01/23/2002 PAT 6,716,109 *OK AOH 5/23/05* *OK AOH 11/16/05*

** FOREIGN APPLICATIONS ***** *OK AOH 5/23/05* *OK AOH 11/16/05*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
 ** 05/28/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY IA	SHEETS DRAWING 12	TOTAL CLAIMS 17	INDEPENDENT CLAIMS 3
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35 USC 119 (a-d) conditions met
☐ yes ☒ no ☐ Met after
 Allowance

Verified and
Acknowledged

Examiner's Signature *AOH* Initials *AOH*

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TITLE
 Putting aid and method for using same

FILING FEE RECEIVED 385	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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